

**TOWN OF DAVIE  
TOWN COUNCIL AGENDA REPORT**

**TO:** Mayor and Councilmembers

**FROM/PHONE:** Herb Hyman/1016

**PREPARED BY:** Herb Hyman

**SUBJECT:** Resolution

**AFFECTED DISTRICT:** n/a

**ITEM REQUEST:** **Schedule for Council Meeting**

**TITLE OF AGENDA ITEM:** SELECTION OF FIRM - A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING THE FIRM OF THE URBAN GROUP, INC. TO PROVIDE APPRAISAL SERVICES FOR THE NEIGHBORHOOD STABILIZATION PROGRAM AND AUTHORIZING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AN AGREEMENT FOR SUCH SERVICES.

**REPORT IN BRIEF:** The Town solicited competitive sealed proposals to provide appraisal services for the Neighborhood Stabilization Program. RFP documents were sent to eighteen (18) prospective respondents. Additionally, the solicitation was advertised statewide in Florida Bid Reporting and nationally in BidNet and also posted on the Town's website. The Town received two (2) responses. All proposals are available for viewing in the Purchasing Division. The selection committee recommends The Urban Group, Inc. in accordance with the attached scoring sheet. Upon approval of this resolution, the negotiation team will begin negotiating a contract with the selected firm and present that agreement for approval at a future meeting date.

**PREVIOUS ACTIONS:** n/a

**CONCURRENCES:** The selection committee scored The Urban Group, Inc. as the highest scoring firm.

**FISCAL IMPACT:** Yes

Has request been budgeted? Yes

If yes, expected cost: To be negotiated with the selected firm

Account name and number: Housing and Community Development

Additional Comments: n/a

**RECOMMENDATION(S):** Motion to approve resolution

**Attachment(s):**

Procurement Authorization

Selection Committee Ranking Sheet

Incorporation Information

RESOLUTION NO. \_\_\_\_\_

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING THE FIRM OF THE URBAN GROUP, INC. TO PROVIDE APPRAISAL SERVICES FOR THE NEIGHBORHOOD STABILIZATION PROGRAM AND AUTHORIZING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AN AGREEMENT FOR SUCH SERVICES.

WHEREAS, the Town solicited proposals to provide appraisal services for the Neighborhood Stabilization Program; and

WHEREAS, the selection committee has selected The Urban Group, Inc. as the firm best qualified to provide the required services; and

WHEREAS, it is in the Town's best interest to execute a contract for such services.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA:

SECTION 1. The Town Council of the Town of Davie does hereby accept the selection of The Urban Group, Inc. as the firm best qualified to provide the required services and authorizes the Town Administrator or his designee to negotiate an agreement for such services and present that contract for approval at a future meeting date. Should no agreement be reached with the highest ranking firm, then the Town Administrator or his designee shall negotiate with the next ranked firm and present that agreement for approval.

SECTION 2. This resolution shall take effect immediately upon its passage and adoption.

PASSED AND ADOPTED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 2009

\_\_\_\_\_

\_\_\_\_\_

MAYOR/COUNCILMEMBER

Attest:

\_\_\_\_\_

TOWN CLERK

APPROVED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 2009

# TOWN OF DAVIE PROCUREMENT AUTHORIZATION

ACCOUNT NUMBER	BUDGET ITEM & DESCRIPTION	APPROXIMATE COST
	Request for Proposals	
	Appraisal Services	
	NSP Single-family Purchase	
	Assistance Program	

METHOD OF PROCUREMENT (check the one that applies)

☐ Open Competitive Bidding  
☐ Piggyback on Contract Number  
☐ Sole Source  
☒ Request For Proposals

**SPECIFICATIONS & LIST OF VENDORS MUST BE ATTACHED**

Signed \_\_\_\_\_  
Department Head:

Have Funds been Reserved N/A - NO ACCOUNT OR AMOUNT LISTED

Date 3/19/09 Signed [Signature]

Signed [Signature]  
Town Administrator

VENDOR	<u>BIDS SUBMITTED</u>	COST
<u>THE URBAN GROUP</u>		<u>RANKED 1ST</u>
<u>ADRIAN GONZALEZ</u>		<u>RANKED 2ND</u>

Signed [Signature]  
Procurement Manager

**BID SPECIFICATION COMMITTEE'S RECOMMENDATION**

Vendor	Cost
<u>THE URBAN GROUP</u>	<u>RANKED 1ST</u>

	A	B	C	D	E	F	G
1							
2							
3							
4							
5							
6	COMMITTEE MEMBER	URBAN GROUP	ADRIAN GONZALEZ				
7							
8							
9	W. ACKERMAN	AB	5521				
10	R. MUNIZ	100	95				
11	M. DIEZ	85	65				
12	L. NGUYEN	95	85				
13	B. HITCHCOCK	73	42				
14	G. MOSS	100	73				
15	H. HYMAN	100	47				
16							
17	TOTAL	553	407				
18							
19	RANKING	1 <sup>ST</sup>	2 <sup>ND</sup>				
20							

<b>W-9</b> Form Rev. November 2005 Department of the Treasury Internal Revenue Service	<b>Request for Taxpayer Identification Number and Certification</b>	Give form to the requester. Do not send to the IRS.
Name (as shown on your income tax return) <b>THE URBAN GROUP, INC.</b>		
Business name, if different from above <b>THE URBAN GROUP, INC.</b>		
Check appropriate box: <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Sole proprietor <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other <input type="checkbox"/> <input type="checkbox"/> Exempt from backup withholding		
Address (number, street, unit apt. or suite no.) <b>1424 SOUTH ANDREW'S AVENUE #200</b>		
City, state and ZIP code <b>FORT LAUDERDALE FLORIDA 33316</b>		
(List account number(s) here (optional))		
<b>Section 1 Taxpayer Identification Number (TIN)</b>		
Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3.		
Social security number <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px;"></div>		or Employer identification number <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px; text-align: center;">5912414129145</div>
<b>Section 2 Certification</b>		
Under penalties of perjury, I certify that:		
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and		
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and		
3. I am a U.S. person (including a U.S. resident alien).		
Certification instructions: You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)		
Sign Here	Signature of U.S. person <i>Howard W. Stenke</i>	Date <i>5/19/09</i>
<b>Purpose of Form</b> A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA. U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:		
1. Certify that the TIN you are giving is correct for you are waiting for a number to be issued). 2. Certify that you are not subject to backup withholding, or 3. Claim exemption from backup withholding if you are a U.S. exempt payee. In 2 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.		
<b>Note.</b> If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9. For federal tax purposes, you are considered a partner if you are:		
• An individual who is a citizen or resident of the United States; • A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States; or • Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.		
<b>Special rules for partnerships.</b> Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.		
The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:		
• The U.S. owner of a disregarded entity and not the entity.		



I, Howard W. Steinholtz, being first duly sworn state that:

The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: THE URBAN GROUP, INC.  
 Address: 1424 SOUTH ANDREWS AVENUE, #200  
FORT LAUDERDALE, FLORIDA 33316  
 FEIN 59-2442945  
 State and date of incorporation Florida 8/9/1984

#### OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
<u>Howard W Steinholtz</u>	<u>2000 BARCELONA DR.</u> <u>FORT LAUDERDALE, FL 33301</u>	<u>100%</u>
		%
		%
		%

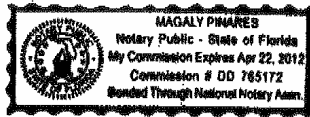
2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address
<u>N/A</u>	

Howard W. Steinhilz  
Signature of Affiant

Howard W. Steinhilz  
Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 19 day of  
May 2009, by Howard W. Steinhilz (he/she is  
personally known to me or has presented as  
identification.



Magaly Pinazles  
Notary Public, State of Florida at Large

MAGALY PINAZLES  
Print or Stamp of Notary

Serial Number \_\_\_\_\_

My Commission Expires \_\_\_\_\_

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<b>Detail by Entity Name</b>					
<b>Florida Profit Corporation</b>					
THE URBAN GROUP, INC.					
<b>Filing Information</b>					
<b>Document Number</b> M03785					
<b>FEI/EIN Number</b> 592442945					
<b>Date Filed</b> 08/09/1984					
<b>State</b> FL					
<b>Status</b> ACTIVE					
<b>Principal Address</b>					
1424 SOUTH ANDREWS AVE. STE 200 FORT LAUDERDALE FL 33316 US Changed 03/14/1994					
<b>Mailing Address</b>					
1424 SOUTH ANDREWS AVE. STE 200 FORT LAUDERDALE FL 33316 US Changed 03/14/1994					
<b>Registered Agent Name &amp; Address</b>					
STEINHOLZ, HOWARD W 1424 S ANDREWS AVE STE 200 FT LAUDERDALE FL 33316 US Name Changed: 01/17/2005 Address Changed: 03/14/1994					
<b>Officer/Director Detail</b>					
<b>Name &amp; Address</b>					
Title PDS					
STEINHOLZ, HOWARD W 1424 S ANDREWS AVE, STE 200					

FT LAUDERDALE FL 33316

**Annual Reports****Report Year Filed Date**

2007	03/26/2007
2008	02/04/2008
2009	01/20/2009

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